YUUJ	ж			PTO/SB/22 (12-0-
PEŢ	ON FOR EXTENSION OF TIME UNDER	Docket Number (Optional) 021737-000500US		
MART	FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			
Appli	cation Number 09/733,616	Filed December 7, 2000		
	COMPUTER IMPLEMENTED METHOD OF GEN PRMATION DISCLOSURE STATEMENTS	IERATING		
Art Unit 3629			Examiner Janice A. Mooneyham	
	is a request under the provisions of 37 CFR 1.136 cation.	(a) to extend the per	iod for filing a reply in	the above identified
The	requested extension and fee are as follows (check	time period desired	and enter the approp	riate fee below):
	·	<u>Fee</u>	Small Entity Fee	2
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
\boxtimes	Applicant claims small entity status. See 37 CFF	₹ 1.27.		
	A check in the amount of the fee is enclosed.			
	Payment by credit card. Form PTO-2038 is attached.			
\boxtimes	The Director has already been authorized to charge fees in this application to a Deposit Account.			
\boxtimes	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 20-1430. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
l ar	n the applicant/inventor. assignee of record of the entire	interest. See 37 CF	R 3.71.	
	Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
	attorney or agent of record. Registration Number <u>44,187</u>			
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 44,187				
	<u></u>			er 23, 2005 late
	Ol 45 King Day 14 403			
-	Chad E. King, Reg. No. 44,187 Typed or printed name		303.571.4000 Telephone Number	
NOTE:	Signatures of all the inventors or assignees of record of the entire	re interest or their represen	ntative(s) are required. Sub	mit multiple forms if more than
	nature is required, see below. Fotal of forms are su	lbmitted		
' لسب	ionis are su			